## First Responders at the Border WHTI

## <u>Procedure for Clearing Ambulances at Michigan – Ontario Ports of Entry Sample</u>

- The following establishes procedures for processing ambulances at Michigan-Ontario Ports of Entry. These procedures ensure national security and admissibility issues are satisfied, while expeditiously processing the medical staff and patient into either country.
- EMS and the area hospitals will provide complete and accurate fax notification 15 minutes prior to the ambulance arriving into either country.
- The arriving port Supervisor will place a return call to the ambulance dispatch to confirm receipt of the fax and provide any further instructions, if necessary.
- The arriving port Supervisor will ensure all names on the fax are immediately queried for admissibility or national security concerns.
- Prior to the ambulance's arrival, the on-duty Chief will be notified if issues are identified that require the ambulance to be referred for Secondary examination.
- The Port Supervisor will immediately prepare and coordinate accordingly with the facility operator to select an avenue to ensure the ambulance is processed in an expeditious manner
- Upon arrival, the ambulance will stop at Primary to allow the officer to verify the identification/admissibility of the individuals in the ambulance.
- If issues arise on Primary requiring the ambulance to be referred to Secondary, the shift supervisor must be immediately contacted.
- If the patient is in a life-threatening condition, an officer will immediately be assigned to escort the ambulance to the hospital until admissibility issues can be resolved.
- A parole may be necessary if the patient is inadmissible to the receiving country and may be issued at the hospital.
- All actions other than release at Primary require Chief notification as soon as practicable. Notifications must not delay the transfer of the patient.
- If, due to life-threatening time restraints, a fax is not sent, the supervisor will be immediately contacted and respond to the Primary lane to assist with the inspection.



## **Emergency Medical Transfer**

DATE	AMBUL	AMBULANCE #				
SENDING FACILITY_						
Telephone Number &	Extension ()	)				
RECEIVING FACILITY	r:					
<b>Nan</b> (First, Middle	ne	Role (Patient, driver, paramed	lic. etc.)	DOB d/m/v	Citizenship	
Ç. n. 2-1,		(	, /	drillry		
I have completed this form a hospital in a foreign coun		s information is being forwar	rded for the p	ourpose of expediti	ng this patient transfer to	
Signature:		Title_				
Relationship to Patient:		Date:				
NOTE: THE AMBULANCE THE AMBULANCE SHOUL	& OCCUPANTS MAY E D HAVE PROOF OF C TALÆMS IDENTIFICA	DE SUBJECT TO INSPECTION ITIZENSHIP DOCUMENTS TION WILL BE ACCEPTE	ON TO THE U	T/BIRTH CERTIFI	CATE) & PHOTO I.D. ON	
<ol><li>This form is to be faxe</li></ol>	d to the port at least 15 i	pers listed below and ask fo minutes prior to the departur call the sending facility to v	e of the ambu	ulance.	_	
Detroit Tunnel – Ambassador Bridge – Blue Water Bridge –	CBP VOICE = 313	-568-6019 or 6020 226 3161 985 9541 ext 103 or ext 23	CBP FA)	( – 313-568-6021 ( – 313 226 3140 ( – 810 985 6070		
Detroit Tunnel – Ambassador Bridge – Blue Water Bridge	CBSA VOICE - 51	9 257 6469 or 6975 9 257 6515 or 6514 9 336 3097 or 337 6922	CBSA FA	AX - 519 257 6596 AX - 519 257 6493	3	

THIS DOCUMENT TO BE DESTROYED WITHIN TWELVE HOURS OF RECEIPT

CONFIDENTIAL WHEN COMPLETED